CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

AIR POLITICAL PRACTICES COMMISSION

A Public Document Please type or print in ink. (MIDDLE) DAYTIME TELEPHONE NUMBER (LAST) Tofanelli Gary MAILING ADDRESS STATE ZIP CODE OPTIONAL: E-MAIL ADDRESS CITY STREET (Business Address Acceptable) 1. Office, Agency, or Court 4. Schedule Summary Name of Office, Agency, or Court: ➤ Total number of pages including this cover page: . Division, Board, District, if applicable: ▶ Check applicable schedules or "No reportable interests." **Board of Supervisors Calaveras County** I have disclosed interests on one or more of the Your Position: attached schedules: Supervisor District 1 Schedule A-1 Yes - schedule attached ▶ If filing for multiple positions, list additional agency(ies)/ Investments (Less than 10% Ownership) position(s): (Attach a separate sheet if necessary.) Schedule A-2 Yes – schedule attached Investments (10% or Greater Ownership) Agency: _____ Schedule B Yes - schedule attached Real Property Schedule C Yes - schedule attached Income, Loans, & Business Positions (Income Other than Gifts 2. Jurisdiction of Office (Check at least one box) and Travel Payments) ☐ State Schedule D Yes - schedule attached ■ County of Calaveras Income - Gifts ☐ City of — Schedule E ☐ Yes - schedule attached Income - Gifts - Travel Payments Multi-County _____ -or-Other _ No reportable interests on any schedule 3. Type of Statement (Check at least one box) ☐ Assuming Office/Initial Date: ____/__ 5. Verification Annual: The period covered is January 1, 2009, I have used all reasonable diligence in preparing this through December 31, 2009. statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any O The period covered is ____/___, through attached schedules is true and complete. December 31, 2009. i certify under penalty of perjury under the laws of the State Leaving Office Date Left: ____/__ of California that the foregoing is true and correct. (Check one) O The period covered is January 1, 2009, through the 3/31/10 date of leaving office. Date Signed ______

-Or-

_/____, through

Signature

O The period covered is _

Candidate

the date of leaving office.

Election Year: __

FPPC Form 700 (2009/2010)

official.)